



STATE OF WISCONSIN

SECTION A: REGISTRANT INFORMATION A1. Name of Committee/Conduit (in full)	ON		
Chery Berken	A3. Email	A4. Phone	
A2. Committee/Conduit ID Number (if applicable)	Chery berkoo	PO GRADI COAX	0-4719170
A5. Mailing Address S17 124 Que	Green BAY	A7. State	A8. Zip 54303
SECTION B: REPORT INFORMATION			
B1. Report Type (Choose One) January Continuing July Continuing Spring Pre-Primary Spring Pre-Election	Fall Pre-Primary September Fall Pre-Election	Special Pre-Primary Special Pre-Election Special Post-Election	B2. Special Election Date (if applicable)
Reporting Period The start date for your campaign finance report should be the day previous campaign finance. Example: If your previous report had an end date of June 30, this report should have a start date of July	a start date of January 1 and	B3. Reporting Period Start Date 1000-20 B4. Reporting Period End Date	
Review the filing calendar with reporting periods online at: https://	/Ethics.wi.gov/FilingCalendar	12-31-20)
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund General Fund Segregated Fund	Account? (Choose One)		
SECTION C: LIMITED ACTIVITY REPOR	RTING EXEMPTION	(OPTIONAL)	
Filing Exemption Registrants that will not accept contributions, make disbursements aggregate amount of more than \$2,000 in a calendar year are eligicampaign finance reports. Exempt status is effective only for the congranted. Registrants wishing to remain on exempt status must rene not claim exemption in the year of their election before the day the	ible for exemption from filing alendar year in which it is w each year. Candidates may	C1. Exemption Request and Affir Yes, this registrant is eligibl and would like to request an calendar year. No, this registrant is not req	e for a filing exemption exemption for this
SECTION D: CERTIFICATION			
I certify that the above named registrant has not engaged in any fithe same as previously reported. This report fulfills the requirement	nancial transactions during the parts under Wis. Stat. § 11.0103(3	period covered by this report and that to ()(d).	the cash balance remains
Authorized Representative			
D1. Printed Name D2.	Signature	200	D3. Date
Chery Derrical	reef L	(lext)	1 / 00



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION	ON				
A1. Name of Committee/Conduit (in full)					
Berndt for Brown County Executive	W. H. W.				
A2. Committee/Conduit ID Number (if applicable)	A3. Email	A4. PI		====	
	berndt_mark@yahoo.co	m (920	0) 246-		
A5. Mailing Address	A6. City		A7. State	A8. Zip	
1044 WRIGHTSTOWN ROAD	DE PERE		WI	54115	
SECTION B: REPORT INFORMATION					
B1. Report Type (Choose One) January Continuing July Continuing Spring Pre-Primary Spring Pre-Election	September S	ecial Pre-Prin ecial Pre-Ele ecial Post-Ele	mary 1	B2. Special Election Date (if applicable)	
Reporting Period The start date for your campaign finance report should be the day f previous campaign finance. Example: If your previous report had a an end date of June 30, this report should have a start date of July	ollowing the end date of your start date of January I and 7/1 /2	ng Period Sta) ng Period En			
Review the filing calendar with reporting periods online at: https://	4 4 5 4			-2021)	
Party and Legislative Campaign Committees Only					
B5. Is This Report for Your General Fund or Segregated Fund General Fund Segregated Fund	Account? (Choose One)				
Segregated Fund					
SECTION C: LIMITED ACTIVITY REPOR					
Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. C1. Exemption Request and Affirmation Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. Implication No., this registrant is not requesting exemption					
SECTION D: CERTIFICATION	National Contract				
I certify that the above named registrant has not engaged in any fin the same as previously reported. This report fulfills the requirement		y this report	and that the	cash balance remains	
Authorized Representative	C!			D2 D 4	
D1. Printed Name Mark Berndt	Mark Berndt		100	12/23/20	
Land to the state of the state					





CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY



STATE OF WISCONSIN

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMAT	ION				
A1. Name of Committee/Conduit (in full)					
Exigods of Menson P	mahanis				
A2. Committee/Conduit ID Number (if applicable)	A3. Email	A4. Phone			
Az. Committee/Conduit 15 Number (ii apprendie)	100000000000000000000000000000000000000				
	Meganboren	articolognail.com	140 7:-		
A5. Mailing Address	Meganberch	A/. State	The state of the s		
1146 9th 37.	Oreante	ay vi	67504		
SECTION B: REPORT INFORMATION					
B1. Report Type (Choose One)			B2. Special Election		
January Continuing Spring Pre-Primary	Fall Pre-Primary	Special Pre-Primary	Date (if applicable)		
July Continuing Spring Pre-Election	September	Special Pre-Election			
	Fall Pre-Election	Special Post-Election			
Reporting Period		B3. Reporting Period Start Date			
The start date for your campaign finance report should be the day		Tul us 1st	2020		
previous campaign finance. Example: If your previous report had an end date of June 30, this report should have a start date of Jul		B4. Reporting Period End Date			
in the second se		Dag 313+	anna		
Review the filing calendar with reporting periods online at: https://www.news.com/news/news/news/news/news/news/news/news	://Ethics.wi.gov/FilingCalendar	Dec. 3/31	9600		
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fun	d Assount? (Chassa One)				
General Fund Segregated Fund	u Account: (Choose One)				
SECTION C: LIMITED ACTIVITY REPO	RTING EXEMPTION	(OPTIONAL)			
Filing Exemption	NUMBER OF STREET	C1. Exemption Request and Affir			
Registrants that will not accept contributions, make disbursement		Yes, this registrant is eligible			
aggregate amount of more than \$2,000 in a calendar year are eli	gible for exemption from filing	and would like to request an	exemption for this		
campaign finance reports. Exempt status is effective only for the granted. Registrants wishing to remain on exempt status must rem	new each vear. Candidates may	calendar year.			
not claim exemption in the year of their election before the day th		No, this registrant is not req	uesting exemption		
	estancia. Accidenticas canas Catalogos.	Y			
SECTION D: CERTIFICATION					
I certify that the above named registrant has not engaged in any the same as previously reported. This report fulfills the requirement	financial transactions during the pents under WIS. STAT. § 11.0103(3	period covered by this report and that to ()(d).	he cash balance remains		
Authorized Representative					
D1. Printed Name D	2. Signature		D3. Date		
MegenBornhout	megnit	Money	1/8/2021		
			/ /		





STATE OF WISCONSIN



SECTION A: REGISTRANT INFORMATION A1. Name of Committee/Copduit (in full)
A2. Committee/Condul ID Number (if applicable) A3. Email A4. Phone
spuelded 122 yahos. com 520 497-3052
A5. Mailing Address 3249 West Port Rd. A6. City Coreen By WE 54313
SECTION B: REPORT INFORMATION
B1. Report Type (Choose One) January Continuing
Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1. B3. Reporting Period Start Date 7-1-2020 B4. Reporting Period End Date
Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) General Fund Segregated Fund
SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)
Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. C1. Exemption Request and Affirmation Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. No, this registrant is not requesting exemption
SECTION D: CERTIFICATION
I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § $11.0103(3)(d)$.
Authorized Representative D1. Printed Name D2. Signature D3. Date
Petrole J. Buetle, Gester July 1-11-21

CAMPAIGN	FINANCE REPORT	Γ		
LOCAL COMMI	ITTEES OF WISCON	NSIN		
Is This Report an Amendment:	No			
Instructions for completing schedules are on the back	of each schedule.			
COMMITTEE IDENTIFICATION				
Friends of Chu for Supervis	sor			
Friends of Chu for Supernis Street Address 1633 E-Mason St.			OF	FICE USE ONLY
Green Bay, WI 5430 2	_			
Please check if address is different than previously reported, and	complete the Campaign Reg	istration State	ment in the b	ack of this form.
NAME OF REPORT				
January Continuing Pre-Primary July Continuing September Continuing Pre-Election	Spring F	fall 🔲 S	Special	Termination Report also complete Schedule 4
SUMMARY OF RECEIPTS AND	Column A	Colum	nn D	
DISBURSEMENTS	This Period	Cale		
1. RECEIPTS		Year-To	o-Date	
1A. Contributions (Including Loans) from Individuals	\$ 0	\$ 2,66	4.69	
1B. Contributions from Committees (Transfers-In)	\$	\$		
1C. Other Income and Commercial Loans	\$	\$		
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$	\$		
2. DISBURSEMENTS				
2A. Gross Expenditures	\$ 160.00	\$ 2,17	7.19	
2B. Contributions to Committees (Transfers-Out)	\$	\$		
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	\$		
CASH SUMMARY)	
Cash Balance Beginning of Report	\$ 647.50			
Total Receipts	\$ 0	~C	pevie	
Subtotal	\$ 647.50	50	*	
Total Disbursements	\$ 160.00	146	N 15 2021	5 •
CASH BALANCE END OF REPORT	\$ 487.50		elved	
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ -		"Dio.	
LOANS (Balance at the Close of This Period-3B)	\$			

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: 1-14-21
Jim Hutchison	Email Jim hrchis @ gmail.com	Daytime Phone: 920 819 8015

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Page	C	of
9	-	-

Complete Committee Name		

instructions for	completing scriedules are on the back of each scriedule.		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
	Facebook	Fees (Paid)	40,00
9-15-20		Fees (Paid advertisement)	10
	Check if:		
7-15-20	Worth Shore Bank 1901 Main ST Green Bay, W1 5430Z	Bank Fees	120,00
12-17-20	1901 Main 31		/
	Check if: In-Kind Offset		
	Check if:		
	Check if:		
	Check if:		
	Check if:		
	Check if:		
	Check if:		(4)
	oceiveo sui	BTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 160.°°
	JAN 1 5 2021 to	TOTAL ITEMIZED EXPENDITURES	\$
	JAN 1 5 2021	TOTAL TIEMILED EXPENDITURES	-
	BOWLD	TOTAL UNITEMIZED EXPENDITURES	\$
	» Ma	TOTAL EXPENDITURES	\$ 2,177.19





Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION	ON				
A1. Name of Committee/Conduit (in full) Friends of lodd Delain A2. Committee/Conduit ID Number (if applicable)					
A2. Committee/Conduit ID Number (if applicable)	A3. Email friends of todd dela		Phone (920) Z	65-3934 A8. Zip	
A5. Mailing Address	A6. City New Franker		A7. State	A8. Zip 54229	
3838 Congrd Road	New Pranker	1	WI	3 133 1	
SECTION B: REPORT INFORMATION					
B1. Report Type (Choose One) January Continuing July Continuing Spring Pre-Primary Spring Pre-Election	Fall Pre-Primary September Fall Pre-Election	Special Pre-P Special Pre-E Special Post-I	rimary lection Election	B2. Special Election Date (if applicable)	
Reporting Period The start date for your campaign finance report should be the day f previous campaign finance. Example: If your previous report had a an end date of June 30, this report should have a start date of July	start date of January 1 and	B3. Reporting Period S September B4. Reporting Period B		.020	
Review the filing calendar with reporting periods online at: https://	Ethics.wi.gov/FilingCalendar	December.	31, 200	20	
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund ☐ Segregated Fund	Account? (Choose One)				
SECTION C: LIMITED ACTIVITY REPOR	RTING EXEMPTION	(OPTIONAL)			
Filing Exemption Registrants that will not accept contributions, make disbursements, aggregate amount of more than \$2,000 in a calendar year are eligic campaign finance reports. Exempt status is effective only for the cagranted. Registrants wishing to remain on exempt status must renernot claim exemption in the year of their election before the day they	or incur obligations in an ble for exemption from filing clendar year in which it is w each year. Candidates may	C1. Exemption Reques	nt is eligible i request an e	for a filing exemption xemption for this	
SECTION D: CERTIFICATION					
I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d).					
Authorized Representative	Signature			D3. Date	
DI. Printed Name Delain Delain	Signature (COO)	ela		1-4-21	





CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION	ON				
A1. Name of Committee/Conduit (in full) Eisenheim for a Better Green Bay					
A2. Committee/Conduit ID Number (if applicable)	A3. Email erik.b.eisenheim@gmail.com (920) 430-8338				
A5. Mailing Address 843 Dousman Street	A6. City Green Bay		A7. State	A8. Zip 54303	
SECTION B: REPORT INFORMATION					
B1. Report Type (Choose One) January Continuing Spring Pre-Primary July Continuing Spring Pre-Election	Fall Pre-Primary September Fall Pre-Election	Special Special	l Pre-Primary l Pre-Election l Post-Election	B2. Special Election Date (if applicable)	
Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1. Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar B3. Reporting Period Start Date 7/1/20 B4. Reporting Period End Date 12/31/2020					
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund General Fund Segregated Fund	Account? (Choose One)				
SECTION C: LIMITED ACTIVITY REPOR	TING EXEMPTION	I (OPTIONAI	L)		
Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. C1. Exemption Request and Affirmation Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. No, this registrant is not requesting exemption					
SECTION D: CERTIFICATION					
I certify that the above named registrant has not engaged in any fin- the same as previously reported. This report fulfills the requirement			is report and that t	he cash balance remains	
Authorized Representative	7	Energy (Alberta)			
Erik Eisenheim	Signature E			D3. Date 1/15/21	
	n qu		w ,	Recept	

CAMPAIGN LOCAL COMM	D 200		
Is This Report an Amendment: Yes	No No		Received
Instructions for completing schedules are on the back	of each schedule.		JAN-5
COMMITTEE IDENTIFICATION			B 1071
Name of Committee Friends of Patrick Ev	ans		OFFICE USE ONLY
Street Address 1692 Nancy Ave. City. State and Zip Code Green Bay, WZ 5	=		OFFICE USÉ ONLY
City. State and Zip Code Green Bay, WZ 5	14303		
Please check if address is different than previously reported, and	complete the Campaign Reg	istration State	ement in the back of this form.
NAME OF REPORT			
January Continuing Pre-Primary July Continuing Pre-Election	Spring I	fall 🔲 :	Special Termination Report also complete Schedule 4
SUMMARY OF RECEIPTS AND	Column A	Calm	p
DISBURSEMENTS	Column A This Period	Colur Cale	
1. RECEIPTS		Year-T	o-Date
1A. Contributions (Including Loans) from Individuals	\$ O.5	\$ 0,5	
1B. Contributions from Committees (Transfers-In)	\$ 0. ⁵⁵	\$ 0,00	
1C. Other Income and Commercial Loans	8 6 a.s.	\$ 0,00	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 0,0	\$ 0,00	
2. DISBURSEMENTS			
2A. Gross Expenditures	\$ 0°2	\$ O, 50	
2B. Contributions to Committees (Transfers-Out)	\$ 0,00	\$ 0,50	
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 0.50	\$ 0,00	
CASH SUMMARY			
Cash Balance Beginning of Report	\$ 2,418.15		
Total Receipts	\$ 0,00		
Subtotal	\$ 2,418.15		
Total Disbursements	\$ 0,00		
CASH BALANCE END OF REPORT	\$ 2,418.15		
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0,5		
LOANS (Balance at the Close of This Period-3B)	\$ 30,000,00		

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type of Filmt Name of Candidate of Treasurer	Signature of Candida
Patrick M. Evans	Email Daris

01/05/2021 Action reasurer Date: 01/05/2021

Kevans eath net Daytime Phone: 920-494-522

NOTE: The information on this form is required by information may subject you to the penalties of ss.11. .0804, 11.0904, Wis. Stats. Failure to provide the





STATE OF WISCONSIN

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION	
A1. Name of Committee/Conduit (in full) A2. Committee/Conduit ID Number (if applicable) A3. Email	A4. Phone
Michistor County born	Agral can 262-365-7715
A5. Mailing Address 332 Angels Reth Apr. 28 De Perce	A7. State A8. Zip SY/S
SECTION B: REPORT INFORMATION	
B1. Report Type (Choose One) January Continuing	Special Pre-Primary Special Pre-Election Special Post-Election
Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1.	B3. Reporting Period Start Date
Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar	[2/31/2]
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) General Fund Segregated Fund	
SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION	
Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot.	 C1. Exemption Request and Affirmation Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. ✓ No, this registrant is not requesting exemption
SECTION D: CERTIFICATION	
I certify that the above named registrant has not engaged in any financial transactions during the the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)	period covered by this report and that the cash balance remains 3)(d).
Authorized Representative D1. Printed Name D2. Signature	D3. Date
Casey C. Files Carry	Hill 1/11/21
	,



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY STATE OF WISCONSIN

Ascelved 1411 8 JUL 1800

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION					
A1. Name of Committee/Conduit (in full)					
Friends of Emily Jaco A2. Committee/Conduit ID Number (if applicable)	D 2 C , ,	[A 4 B)			
A2. Committee/Conduit ID Number (if applicable)	A3. Email	A4. Ph	one	2/ 22	
	emily districts	cogmania 420)-000	-0602	
A5. Mailing Address		4			
1553 Morrow St	Green Bay wa	r	WI	54302	
SECTION B: REPORT INFORMATION B1. Report Type (Choose One)				B2. Special Election	
January Continuing Spring Pre-Primary July Continuing Spring Pre-Election	Fall Pre-Primary September Fall Pre-Election	Special Pre-Prin Special Pre-Elec Special Post-Ele	ection	Date (if applicable)	
Reporting Period The start date for your campaign finance report should be the day for previous campaign finance. Example: If your previous report had a an end date of June 30, this report should have a start date of July 1	B3. Reporting Period Start Date 7-1-2020 B4. Reporting Period End Date				
Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar				.0	
Party and Legislative Campaign Committees Only					
B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One)					
Missingeneral Fund Segregated Fund					
SECTION C: LIMITED ACTIVITY REPOR	TING EXEMPTION				
Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. C1. Exemption Request and Affirmation Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. No, this registrant is not requesting exemption					
SECTION D: CERTIFICATION					
I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d).					
Authorized Representative					
	Signature			D3. Date	
Emily Jacobson Get A 71-7-2021					





State of Wisconsin

SECTION A: REGISTRANT INFORMATION)N	1. 大道:"如:		
A1. Name of Committee/Conduit (in full)				
Thomas land				
A2. Committee/Conduit ID Number (if applicable)	A3. Email	A4. Phone		
	Sugmico	Motoerone 920-	662-2355 te A8. Zip	
A5. Mailing Address	A6. City	A7. Sta	te A8. Zip	
2091 Magy LN	3 agran co	W	1 7750	
SECTION B: REPORT INFORMATION				
B1. Report Type (Choose One) January Continuing Spring Pre-Primary July Continuing Spring Pre-Election	Fall Pre-Primary September Fall Pre-Election	Special Pre-Primary Special Pre-Election Special Post-Election	B2. Special Election Date (if applicable)	
Reporting Period The start date for your campaign finance report should be the day f previous campaign finance. Example: If your previous report had a an end date of June 30, this report should have a start date of July	start date of January 1 and	B3. Reporting Period Start Date 2020 B4. Reporting Period End Date		
Review the filing calendar with reporting periods online at: https://	Ethics.wi.gov/FilingCalendar	17/31/202	0	
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) General Fund Segregated Fund				
SECTION C: LIMITED ACTIVITY REPOR	RTING EXEMPTION	(OPTIONAL)		
Filing Exemption Registrants that will not accept contributions, make disbursements, aggregate amount of more than \$2,000 in a calendar year are eligicampaign finance reports. Exempt status is effective only for the cagranted. Registrants wishing to remain on exempt status must renernot claim exemption in the year of their election before the day the	ible for exemption from filing dendar year in which it is w each year. Candidates may	C1. Exemption Request and Affi Yes, this registrant is eligible and would like to request a calendar year. No, this registrant is not re	ole for a filing exemption n exemption for this	
SECTION D: CERTIFICATION				
I certify that the above named registrant has not engaged in any fit the same as previously reported. This report fulfills the requirement	nancial transactions during the pats under W15. STAT. § 11.0103(3	veriod covered by this report and that (d).	t the cash balance remains	
Authorized Representative	S:		D3. Date	
D1. Printed Name D2. Thomas Lund	Signature C	Sey	1/11/21	

CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN Is This Report an Amendment: Yes No Instructions for completing schedules are on the back of each schedule. COMMITTEE IDENTIFICATION Name of Committee
Is This Report an Amendment: Yes No Instructions for completing schedules are on the back of each schedule. COMMITTEE IDENTIFICATION
Instructions for completing schedules are on the back of each schedule. COMMITTEE IDENTIFICATION
COMMITTEE IDENTIFICATION Brown Code
S(OWIT = C)
Prante of Committee
MOYNIHAN COMMITTEE FOR RESPONSIBLE GOVERNMENT
Street Address 7444 BARROCK RD
City, State and Zip Code
HSHWAURENON, VII 54313
Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form.
NAME OF REPORT
January Continuing 202 Pre-Primary Spring Fall Special Termination Report also complete Schedule 4
SUMMARY OF RECEIPTS AND Column A This Period Calendar
1. RECEIPTS Year-To-Date
1A. Contributions (Including Loans) from Individuals \$ - \$3,680.00
1B. Contributions from Committees (Transfers-In)
1C. Other Income and Commercial Loans \$.06 \$.98
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) \$.06 \$ 3,780.98
2. DISBURSEMENTS
2A. Gross Expenditures \$ - \$2,510.16
2B. Contributions to Committees (Transfers-Out) \$ \$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B) \$ - \$2,510.16
CASH SUMMARY
Cash Balance Beginning of Report \$1,355.74
Total Receipts \$. 06
Subtotal \$ 1,355. 80
Total Disbursements \$
10tal Disbutscificitis Ψ
CASH BALANCE END OF REPORT \$ 1355.80

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer	Signature of Gandidate py Treasurer Date: 01/14/21
	tatien 1
TATRICK W. MOYNIHAN JR.	Email patrick mounthanice anail. Daytime Phone 20. 448. 4916
	com

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.



Complete Committee Name

RECEIPTS Contributions (Including Loans) From Individuals

Page _____ of ______

Complete Comm	nittee Name	SIRIF CAUDIANIM			
Complete Committee Name MOYNIHAN COMMITTEE FOR RESDONSIBUE CONDEMN ENT Instructions for completing schedules are on the back of each schedule.					
Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total	
	, <u> </u>		Contaiosacon	Total	
	. 11-				

	Check if: ☐ In-Kind ☐ Loan Conduit – Ethics ID#				
	Check if: [] In-Kind [] Loan[] Conduit – Ethics ID#				
	Check if: [] In-Kind [] Loan Conduit - Ethics ID#				
	Check II: I In-Ning Loan Conduit - Ethics ID#				
	Check if: In-Kind Loan Conduit – Ethics ID#			••	
	Check if: [In-Kind [Loan Conduit - Ethics ID#				
	Check if: In-Kind Loan Conduit – Ethics ID#				
	Check if: In-Kind Loan Conduit – Ethics ID#				
	SUBTOTAL	ITEMIZED CONTRIBUTIONS THIS PAGE	\$	-	
		TOTAL ITEMIZED CONTRIBUTIONS	\$		
	TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			•	
	TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			-	

SCHEDULE 1-B

RECEIPTS Contributions from Committees (Transfers-In)

Page 2 of 7

	\sim		
Complete Committee Name	COMMITTEE	FOR RESPONSIBLE	COVERNMENT
Instructions for completing	schedules are on the b	ack of each schedule.	

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
	NA	
	Check if: 🔳 In-Kind 🗈 Loan	
	Check if: In-Kind Loan	
	Check if:	
	Check if: In-Kind Loan	
	Check if: In-Kind Loan	
	Check if:	
	Check if: 🔟 In-Kind 🗈 Loan	
	Check if: In-Kind Loan	
	GRECK II. [1] III-KIIIU [1] LOAII	
	Check if: In-Kind Loan	
	SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE	\$
	TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES	\$



RECEIPTS Other Income and Commercial Loans

Page 3 of 7

Complete Committee Name

Instructions 1	or completing schedules are on the back of each sched	dule.	
Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
12/31	NICOLET NATIONAL BANK 111 H. WASHINGTON ST EREEN BAY, WI 54301	ACCOUNT INTEREST	۵٥.
2020	6900 BAY, WI 54301		
		SUBTOTAL OTHER INCOME THIS PAGE	s - 0b
		TOTAL ITEMIZED OTHER INCOME	s - 06 s - 06
		TOTAL OTHER INCOME	s .01/





DISBURSEMENTS Gross Expenditures

Complete Committee Name	(10MMITTLE	FOR	RESPONSIBLE	COVERMENT
Instructions for completing	schedules are on the ba	ck of each	schedule.	

Instructions for completing schedules are on the back of each schedule.				
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount	
	$N_{\mathcal{F}}$			
	•			
····	Check if:			
	Check if: In-Kind Offset			
	Check if:			
	Check if: In-Kind Offset			
	Check if: In-Kind Offset			
	Check II. [2] III-Kliid Oliset			
	Check if: In-Kind Offset			
	Check if: In-Kind Offset			
	I			
	Check if: In-Kind Offset			
	SUB	TOTAL ITEMIZED EXPENDITURES THIS PAGE	\$	
			_	
		TOTAL ITEMIZED EXPENDITURES	\$	
	TOTAL UNITEMIZED EXPENDITURES \$			
		TOTAL EXPENDITURES	l e	



DISBURSEMENTS Contributions To Committees (Transfers-Out)

Page _ _ _ of _ _ 7__

	HAN COMMITTEE FOR RESPONSIBLE GOVERNM	otr	
Date	completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code	Amount	Y-T-D
			Total
	NA		
****	Check if: 📋 In-Kind 📋 Loan		
	Check if: 🔲 In-Kind 🔯 Loan		
	Check if: In-Kind I Loan		
	oneda ii. [i] iii-kiiid (t) Edeli		
	Check if: ☐ In-Kind ☐ Loan		
	Check if: ☐ In-Kind ☐ Loan		
	Check if:		***************************************
	Check if: In-Kind Loan		
	Section [2] Information [2] Boom		
	Check if: [In-Kind [Loan		
	Shown [2] at time [2] Boom		
	Check if: [In-Kind		
	Oneck ii. E. makiin E. Loen		
	SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE	\$	
			<u> </u>
	TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES	3	

SCHEDULE 3-A

Incurred Obligations Excluding Loans ADDITIONAL DISCLOSURE

Page <u>•</u> of <u>7</u>

Complete C	NIHAN COMMITTEE FOR	PESPOVISIBLE	COVERNI	WAT-	
Instructions for completing schedules are on the back of each schedule.					
		Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1					
	MA	Nature of Debt (Purpose)			
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1					
		Nature of Debt (Purpose)			
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1					
		Nature of Debt (Purpose)			
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1					
		Nature of Debt (Purpose)			
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1					
		Nature of Debt (Purpose)			
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1					
:		Nature of Debt (Purpose)			
Date	Full Name, Mailing Address and Zip Code of Creditor				
1 1					
		Nature of Debt (Purpose)	· · · · · · · · · · · · · · · · · · ·		
Date	Full Name, Mailing Address and Zip Code of Creditor				T
, ,					
		Nature of Debt (Purpose)			
		SUBTOTAL ITEMIZEI	D OBLIGATIONS THIS	PAGE \$	***************************************
•		тот	AL ITEMIZED OBLIGA	TIONS \$	
	TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS \$				
	TOTAL INCURRED OBLIGATIONS \$				



Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

Page <u>7</u> of <u>7</u>

TOTAL OUTSTANDING LOANS \$

MOAV	mittee yame COMMITIEE FOR	2 RESpons	51BUE 60	WERSMANT		
Instructions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code of Loan Source		Outstanding Obligations Beginning of This	New Loans This	Cumulative Payments This Period	Outstanding Obligations End of This Period	
Date /	NA	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Period	Period		
List All Endorse	ers or Guarantors (if any)		÷			
Fuli Name, Ma of Guarantor	iling Address and Zip Code	Occupation				
		Amount Guarante	ed Outstanding			
Full Name, Ma of Guarantor	iling Address and Zip Code	Occupation				
		Amount Guarante	ed Outstanding			
	Full Name, Mailing Address and Zip Code of Loan S	ource	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /						
List All Endorse	ers or Guarantors (if any)		'			
Full Name, Mai of Guarantor	iling Address and Zip Code	Occupation				
		A	TTT			
		\$	ed Outstanding			
Full Name, Mai	iling Address and Zip Code		ed Outstanding			
	iling Address and Zip Code	\$				
of Guarantor	iling Address and Zip Code Full Name, Mailing Address and Zip Code of Loan S	\$ Occupation Amount Guarante		New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
		\$ Occupation Amount Guarante	ed Outstanding Outstanding Obligations Beginning of This		Payments	Obligations
of Guarantor Date		\$ Occupation Amount Guarante	ed Outstanding Outstanding Obligations Beginning of This		Payments	Obligations
Date / / List All Endorse	Full Name, Mailing Address and Zip Code of Loan S	\$ Occupation Amount Guarante	ed Outstanding Outstanding Obligations Beginning of This		Payments	Obligations
Date / / List All Endorse	Full Name, Mailing Address and Zip Code of Loan So ers or Guarantors (if any)	\$ Occupation Amount Guarante \$ ource	Outstanding Outstanding Obligations Beginning of This Period		Payments	Obligations
Date / / List All Endorse Full Name, Mai of Guarantor	Full Name, Mailing Address and Zip Code of Loan So ers or Guarantors (if any)	\$ Occupation Amount Guarante \$ Occupation Amount Guarante	Outstanding Outstanding Obligations Beginning of This Period		Payments	Obligations
Date / / List All Endorse Full Name, Mai of Guarantor	Full Name, Mailing Address and Zip Code of Loan So ers or Guarantors (if any) iling Address and Zip Code	S Occupation Amount Guarante S Occupation Amount Guarante S	ed Outstanding Outstanding Obligations Beginning of This Period		Payments	Obligations





STATE OF WISCONSIN

A2. Committee/Conduit ID Number (if applicable) A3. Email William Joseph Goldwich A4. Phone William Joseph Goldwich A5. Mailing Address A6. City A7. State A6. City A7. State A6. City A7. State A6. City A7. State A7. State A8. App A8. Mailing Address A6. City A7. State A8. App A8. Mailing Address A6. City A7. State A8. App A9. State A8. App A9. App A8. A		THE RESERVE
A2. Committee/Conduit ID Number (if applicable) A3. Imail A3. Imail A3. Mailing Address A6. City A7. State A8. Zip A7. State A8. Zip A8. Special Pre-Pimary Sa. Reporting Pre-Blection B8. Reporting Pr	SECTION A: REGISTRANT INFORMATION	
A5. Mailing Address A6. City A7. State A8. Zip A7. State A7. State A7. State A8. Zip A7. State A8. Zip A7. State A7. State A7. State A7. State A8. Zip A7. State A7. State A8. Zip A7. State A7. State A8. Zip A7. State A7. State A7. State A7. State A8. Zip A7. State A7. State A8. Zip A7. State A8. Zip A7. State A7. State A8. Zip A7. State A8. Zip A7. State A9		
SECTION B: REPORT INFORMATION B1. Report Type (Choose One)		4
SECTION B: REPORT INFORMATION B1. Report Type (Choose One)	William joseph i Qiclardian 920-461-	284)
B1. Report Type (Choose One) danuary Continuing		54303
Special Pre-Primary Special Pre-Primary Special Pre-Primary Special Pre-Election	SECTION B: REPORT INFORMATION	
The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1. Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar Party and Legislative Campaign Committees Only BS. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) General Fund SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL) Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. SECTION D: CERTIFICATION I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3) (d). Authorized Representative	Spring Pre-Primary Fall Pre-Primary Special Pre-Primary Special Pre-Primary Special Pre-Primary Special Pre-Primary Special Pre-Election Special Pre-Primary Special Pre-Prim	
previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1. Review the filing calendar with reporting periods online at: https://Ethics.wi.gow/FilingCalendar Party and Legislative Campaign Committees Only BS. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL) Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. SECTION D: CERTIFICATION I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3) (d). Authorized Representative	reporting 1 area	
Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) General Fund Segregated Fund SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL) Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. SECTION D: CERTIFICATION I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3) (d). Authorized Representative	previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of lune 30, this report should have a start date of July 1 B4. Reporting Period End Date	
B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) General Fund Segregated Fund Segregated Fund CIVITY REPORTING EXEMPTION (OPTIONAL) Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. SECTION D: CERTIFICATION I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3) (d). Authorized Representative	1/12/12070	
SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL) Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. SECTION D: CERTIFICATION I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d). Authorized Representative	Party and Legislative Campaign Committees Only	
Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. SECTION D: CERTIFICATION I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wts. Stat. § 11.0103(3) (d). Authorized Representative		
Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. SECTION D: CERTIFICATION I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3) (d). Authorized Representative	SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)	
aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. SECTION D: CERTIFICATION I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3) (d). Authorized Representative		
granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. SECTION D: CERTIFICATION I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d). Authorized Representative	aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing and would like to request an ex	xemption for this
SECTION D: CERTIFICATION I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d). Authorized Representative	granted. Registrants wishing to remain on exempt status must renew each year. Candidates may	sting exemption
I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d). Authorized Representative	not claim exemption in the year of their election before the day they appear on the ballot.	
I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d). Authorized Representative		数据数据数据
the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d). Authorized Representative	SECTION D: CERTIFICATION	
·	I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d).	cash balance remains
D1 D1 L121 D3 Date	·	D2 Data
DI. Printed Name D2. Signature D3. Date 12/23/2020	DI. Printed Name	12/23/2020





CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION				
A1. Name of Committee/Conduit (in full) Citizens for Seber				
A2. Committee/Conduit ID Number (if applicable)	A3. Email	A4. Phone 920.69	50.6366	
A5. Mailing Address 480 Masks Lake	A6. City Bay	A7. Stat	6 A8. Zip 54311	
SECTION B: REPORT INFORMATION	1			
B1. Report Type (Choose One) January Continuing	Fall Pre-Primary September Fall Pre-Election	Special Pre-Primary Special Pre-Election Special Post-Election	B2. Special Election Date (if applicable)	
Reporting Period The start date for your campaign finance report should be the day f previous campaign finance. Example: If your previous report had a an end date of June 30, this report should have a start date of July	start date of January 1 and	B3. Reporting Period Start Date B4. Reporting Period End Date	>	
Review the filing calendar with reporting periods online at: https://	Ethics.wi.gov/FilingCalendar	12/3/1202	_0	
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund General Fund Segregated Fund	Account? (Choose One)			
SECTION C: LIMITED ACTIVITY REPOR	RTING EXEMPTION	(OPTIONAL)		
Filing Exemption Registrants that will not accept contributions, make disbursements, aggregate amount of more than \$2,000 in a calendar year are eligic campaign finance reports. Exempt status is effective only for the cagranted. Registrants wishing to remain on exempt status must rene not claim exemption in the year of their election before the day the	ible for exemption from filing alendar year in which it is w each year. Candidates may	C1. Exemption Request and Affin Yes, this registrant is eligib and would like to request an calendar year. No, this registrant is not request	le for a filing exemption n exemption for this	
SECTION D: CERTIFICATION				
I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d).				
Authorized Representative	S: a tours		D3. Date	
D1. Printed Name D2.	Signature /	5	1/15/207	



STATE OF WISCONSIN

SECTION A: REGISTRANT INFORMATIO	ON		
A1. Name of Committee/Conduit (in full)		<	
Streckenbuch for Brose	un County.	theater	L
A2. Committee/Conduit ID Number (if applicable)	A3. Email	A4. Pho	ne
	Streckenbach forwig	Egnail. um 920	2882231
A5. Mailing Address	A6. City	A	7. State A8. Zip
805 Miramar DR	A3. Email Streckenbuch forwig A6. City C vzen Bay	6	NE 54301
177			
SECTION B: REPORT INFORMATION			
B1. Report Type (Choose One)			B2. Special Election Date (if applicable)
✓ January Continuing Spring Pre-Primary ☐ July Continuing Spring Pre-Election	Fall Pre-Primary September	Special Pre-Prima Special Pre-Elect	11 9
	Fall Pre-Election	Special Post-Elec	
Reporting Period		B3. Reporting Period Star	
The start date for your campaign finance report should be the day for		7/1/20	20
previous campaign finance. Example: If your previous report had a an end date of June 30, this report should have a start date of July 1		B4. Reporting Period End	Date
Review the filing calendar with reporting periods online at: https://l		12/3//2	1020
	Emics. Wi.gowi ming Carenaar	. – / 3 . /	
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund	Account? (Choose One)		
General Fund Segregated Fund	,		
			· 中国 · · · · · · · · · · · · · · · · · ·
SECTION C: LIMITED ACTIVITY REPOR	RTING EXEMPTION	(OPTIONAL)	
Filing Exemption		C1. Exemption Request ar	nd Affirmation
Registrants that will not accept contributions, make disbursements,		Yes, this registrant is	eligible for a filing exemption
aggregate amount of more than \$2,000 in a calendar year are eligi- campaign finance reports. Exempt status is effective only for the ca		I control to the cont	uest an exemption for this
granted. Registrants wishing to remain on exempt status must renev	w each year. Candidates may	calendar year. No. this registrant is	not requesting exemption
not claim exemption in the year of their election before the day they	v appear on the ballot.	\	
SECTION D: CERTIFICATION			
I certify that the above named registrant has not engaged in any fin the same as previously reported. This report fulfills the requiremen	nancial transactions during the p	eriod covered by this report a	nd that the cash balance remains
Authorized Representative		.//	
	Signature		D3. Date
Troy Streckenbach		Mall	12/30/2020
1010000000	1	CALL OF THE STATE	





CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY STATE OF WISCONSIN

SECTION A: REGISTRANT INFORMATION	ON			
A1. Name of Committee/Conduit (in full)				
Friends of Vander Leest A2. Committee/Conduit ID Number (if applicable)	A3. Email	A4. Phone		
		otmail.com (920) 73		
A5. Mailing Address 1616 9th Street	Green Bay	A7. State	54304	
SECTION B: REPORT INFORMATION				
B1. Report Type (Choose One) January Continuing	Fall Pre-Primary September Fall Pre-Election	Special Pre-Primary Special Pre-Election Special Post-Election	B2. Special Election Date (If applicable)	
Reporting Period The start date for your campaign finance report should be the day for previous campaign finance. Example: If your previous report had a an end date of June 30, this report should have a start date of July	start date of January 1 and	9/1/20 B4. Reporting Period End Date		
Review the filing calendar with reporting periods online at: https://		12-31-2021		
Party and Legislative Campaign Committees Only B5. Is This Report for Your General Fund or Segregated Fund	Account? (Choose One)			
General Fund Segregated Fund				
SECTION C: LIMITED ACTIVITY REPOR	TING EXEMPTION	N (OPTIONAL)		
Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. C1. Exemption Request and Affirmation Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. No, this registrant is not requesting exemption				
SECTION D: CERTIFICATION				
I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d)				
Authorized Representative D1. Printed Name D2. Signature D3. Date				
John A. Vander Leest Cath A. Vandh Leet 1-15-2021				
	//	//		